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AMEN	Docket No. 07700/066001									
Applicatio	n No.	Filing I	Date	Examiner	Examiner					
10/560,995-Conf. #9140		December	16, 2005	J.M. Dunlap		2855				
Applicant(s): Hide	eo Morimoto									
Invention: MULTIA	AXIAL SENSO	R								
	• •	THE COMMI								
Transmitted here The fee has beer				7.7						
		Karata Karata III	S AS AMENI							
	Claims Remaining After	Highest Number Previously	Number Extra Claims	Dete						
Total Claims	Amendment 26	- 24 =	Present 2	Rate X 50.00		100.00				
Independent Claims	3	- 3 =	0	x 200.00		0.00				
Multiple Depend	lent Claims (ch	eck if applicabl	e)				٠.			
Other fee (pleas	e specify):									
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:			100.00				
x Large Entity				Small Entity						
				Oman Emity						
No additiona	al fee is require	d for this amer	ndment.							
	ge Deposit Accoopy of this she	———		n the amount of \$ _		•				
A check in th	ne amount of \$		to cover	the filing fee is enc	losed.					
x Payment by				Ū						
The Director is hereby authorized to charge and credit Deposit Account No50-0591										
as described	i below. ny overpaymer	nt								
			n processing	fees required under 3	37 CFR 1.	16 and 1.17.				
1\$	445	a		Dated: S	ontombo	r 24, 2007				
	ha THOWAS			Dated: S	eptembe	24, 2007				
Attorney/Agent	Reg. No.: 33,	986								
OSHA · LIANG 1221 McKinney	St., Suite 280	0								
Houston, Texas (713) 228-8600										

PTO/SB/17 (07-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it displays a valid OMB control number.

	Complete if Known											
Effective on 12/08/. Fees pursuant to the Consolidated Approp	818).	Application Number 10.		0/560,995-Conf. #9140								
FEE TRANS			ecember 16, 2005									
l			ideo Morimoto									
For FY 20			M. Dunlap									
Applicant claims small entity stat	Art Unit	28	855									
TOTAL AMOUNT OF PAYMENT (\$) 100.00			Attorney Docket	No. 07	7700/066001							
METHOD OF PAYMENT (check all that apply)												
Check X Credit Card Money Order None Other (please identify):												
X Deposit Account Deposit Account Number 50-0591 Deposit Account Name: Osha Liang LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of X Credit any overpayments												
fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION	VANDATION FEE											
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES LING FEES		ARCH FEES	FXAMINA	TION FEES	:						
''	Small Entity	01	Small Entity		Small Entity							
Application Type Fee (\$		Fee (\$		Fee (\$)	Fee (\$)	Fees P	aid (\$)					
Utility 300	150	500	250	200	100							
Design 200	100	100	50	130	65							
Plant 200	100	300	150	160	80							
Reissue 300	150	500	250	600	300							
Provisional 200	100	0	0	0	0							
2. EXCESS CLAIM FEES						Fee (\$)	Small Entity Fee (\$)					
Fee Description												
Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100												
Multiple dependent claims	uding Keissues)					360	180					
. ,	T (#\	Eoo l	Daid (C)	Mad	tinla Danend							
<u>Total Claims</u> <u>Extra Claims</u> 26 -24 = 2	Fee (\$) x 50.00 =		Paid (\$) Mult 00.00 Fee		tiple Dependent Claims (\$) Fee Paid (\$))					
26 -24 = 2 HP = highest number of total claims paid fo			0.00	1 66	741	1001010	4					
Indep. Claims Extra Claims	Fee (\$)	Fee I	Paid (\$)									
	× 200.00 =		.00									
HP = highest number of independent claims	s paid for, if greater than ?	3.										
3. APPLICATION SIZE FEE												
If the specification and drawings e	xceed 100 sheets of	paper	(excluding electr	onically file	d sequence of	computer	_					
listings under 37 CFR 1.52(e)),	the application size	fee du	ie is \$250 (\$125 f	or small ent	ity) for each a	additional 50)					
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge):												
SUBMITTED BY			Registration No.	00.000	T-11	(742) 00	0 0600					
Signature # 4	5,079		(Attorney/Agent)	33,986	Telephone	(713) 22						
Name (Print/Typer Jonathan P. Osh	a THOMAS.	SH.	= (LSK.		Date	September	24, 2007					